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THE SENATE OF MARYLAND ANNAPOLIS, MARYLAND 21401

SB374: Workers' Compensation - Occupational Disease Presumptions - 9-1-1 Specialists

Senate Finance Committee | Tuesday, March 8, 2022

“9-1-1-- What is the location of your emergency?”

Imagine answering the phone to a desperate parent whose child is not breathing. After you hang up, the next call is from an injured driver involved in a ten-car pile-up. Once emergency personnel reach the scene, you take a breath, only to pick up the phone and hear from a woman who had just been raped.

A 9-1-1 Specialist's daily job is demanding, harrowing, and essential to public health and safety. The courageous women and men under the headsets are surely our **“First, First Responders.”**

[The National Emergency Numbers Association reported](#) that “There is a staffing crisis in 9-1-1. Public Safety Answering Points [9-1-1 Centers] across the nation are chronically understaffed, leading to a workforce that is continually stressed, overworked, and burned out. New hires and trainees are frequently gone before their probationary periods end.”

Research suggests that [8-24% of 9-1-1 Specialists experience PTSD](#) when psychologically evaluated, and [23.9% exhibited symptoms of probable major depression](#). The effects of trauma will only worsen in a Next Generation 9-1-1 environment, when they will be exposed to gruesome photos and videos as well. These audible and/or visual experiences leave 9-1-1 Specialists even more vulnerable to psychological trauma.

[SB374](#) would establish a narrow Workers' Compensation presumption for 9-1-1 Specialists who suffer from clinically diagnosed, work-related PTSD. This would shift the burden of proving the diagnosis from the suffering 9-1-1 Specialist.

The trauma associated with answering 9-1-1 calls is not hypothetical. On June 4, 2021, Harford County 9-1-1 Specialist, Eric Ishak, [died by suicide](#). He was 27 years old, a husband, and a new father.

The eligibility for this presumption is specific and narrow. A 9-1-1 Specialist seeking compensation must be examined and diagnosed by a psychologist or psychiatrist licensed to practice in the jurisdiction where the 9-1-1 Specialist would be treated. Mental health conditions **must** meet the criteria specified in the [American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders](#) to qualify. Though this is not explicitly stated in the bill (at the advice of the bill drafter), it is implied by requiring the diagnosis of a licensed professional.

I have chaired the Maryland Next Generation 9-1-1 (NG911) Commission for the past four years. On behalf of the NG911 Commission, and with respect and gratitude to our dedicated, tenacious, and courageous public servants who save lives every day, **I implore you to give SB374 a favorable report.**